Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 Page 1 of 61 Document NORTHERN DISTRICT OF ILLINOIS Fill in this information to identify your case: AUG 0 9 2017 United States Bankruptcy Court for the: Northern District of Illinois JEFFREY P. ALLSTEADT, CLERK Case number (If known): _ Chapter you are filing under: INTAKE 1 Chapter 7 Chapter 11 Chapter 12 Chapter 13 Check if this is an amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your DAVID government-issued picture First name identification (for example, First name your driver's license or passport). Middle name Middle name WAUGH Bring your picture Last name Last name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name First name years Middle name Include your married or Middle name maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - 2 0 6 8your Social Security number or federal Individual Taxpayer 9 xx - xx -_____ 9 xx - xx -_____ Identification number (ITIN)

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 2 of 61

D	ebtor 1	DAVID A	WAUGH		Case number (if known)	
		First Name Middl	Name Last Name			
Marian S	STATE ALBERT PARTIES AND	STERRITORIS (SERVICE SERVICE S	About Debtor 1:	T SCAA BOOK IN ALL BOOK BOOK BOOK IN PROPERTY OF A CONTRACTION AND THE ANALYSIS AND	About Debtor 2 (Spouse O	nly in a Joint Case):
4.	and Em	iness names ployer ation Numbers u have used in	☑ I have not used any business r	names or EINs.	☐ I have not used any busir	ness names or EINs.
	the last		Business name		Business name	
		ade names and iness as names	Business name		D	M-+
			Dusiness hanne		Business name	
			EIN		<u>EIN</u> —	
			EIN		EIN	
5.	Where y	ou live			If Debtor 2 lives at a differe	nt address:
			23000 WESTWIND DRIVE	<u> </u>		
			Number Street		Number Street	***************************************
			RICHTON OARK City	IL 60471 State ZIP Code	City	State ZIP Code
			СООК			
			County		County	
			If your mailing address is differe above, fill it in here. Note that the any notices to you at this mailing a	court will send	If Debtor 2's mailing addres yours, fill it in here. Note the any notices to this mailing ad-	at the court will send
			Number Street		Number Street	
			P.O. Box	WWW.	P.O. Box	· · · · · · · · · · · · · · · · · · ·
			City	State ZIP Code	City	State ZIP Code
6.		are choosing	Check one:	Alternálmák esímbákab mundess 4-millul essezetésnés vegyususas selleskeleskel	Check one:	et de
	bankrup		Over the last 180 days before fi I have lived in this district longe other district.	iling this petition, or than in any	Over the last 180 days be I have lived in this district other district.	
			☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Ex (See 28 U.S.C. § 1408.)	plain.
			***************************************		***************************************	

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 3 of 61

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De	htor	1

Debtor 1	DAVID	Α	WAUGH	Case number (If known)
	First Nama	Afiddle Mome	b	Case Harricer (J. Kriowi)

7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	are choosing to file	☐ Cha		, 01111 2010)). 71300,	go to the top of p	age I and Gleck I	trie appropriate box.
	under		· ipter 11				
		☐ Cha	pter 12	J			
		☑ Cha	pter 13	į			
8.	How you will pay the fee	loca you sub	il court f rself, yo mitting y	for more details a ou may pay with o	about how you r cash, cashier's c	nay pay. Typical check, or money	neck with the clerk's office in your lly, if you are paying the fee order. If your attorney is pay with a credit card or check
		☑ Ine	ed to p	ay the fee in ins	stallments. If yo	u choose this o	ption, sign and attach the
		App	lication	for Individuals to	Pay The Filing	Fee in Installme	ents (Official Form 103A).
		By la less pay	aw, a ju than 15 the fee	idge may, but is i 50% of the officia in installments).	not required to, to al poverty line the If you choose the	waive your fee, at applies to you nis option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.
9.	Have you filed for	2 No				***************************************	
	bankruptcy within the last 8 years?	☐ Yes.	District		When		Case number
			District			MM / DD / YYYY	
			DISTRICT	**************************************	When	MM / DD / YYYY	Case number
			District		When	MM / DD / YYYY	Case number
10.	Are any bankruptcy	☑ No		**************************************			
	cases pending or being filed by a spouse who is		Debtor				Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?						Case number, if known
			Debtor				Relationship to you
							Case number, if known
·····						MM / DD / YYYY	
	Do you rent your residence?	☑ No. ☐ Yes.	Go to lii Has you residen	ur landlord obtaine	d an eviction judgi	ment against you	and do you want to stay in your
				Go to line 12.			
				s. Fill out <i>Initial Stat</i> bankruptcy petition		Eviction Judgment	Against You (Form 101A) and file it with

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 4 of 61

First Name Middle Nam	ne	Last Name	terminal representation of the second of the				
Panari Abaut Any I	9aia.	V O	la Branciat				
rt 3: Report About Any i	Jusiness	ses You Own as a So	ie Proprieto	or 			
Are you a sole proprietor of any full- or part-time	🛭 No.	Go to Part 4.					
business?	TYes.	Name and location of bu	ısiness				
A sole proprietorship is a business you operate as an							
individual, and is not a separate legal entity such as		Name of business, if any					
a corporation, partnership, or LLC.		Number Street		······································			
If you have more than one sole proprietorship, use a							
separate sheet and attach it to this petition.		City			State	ZIP Code	
		,					
		Check the appropriate be		•			
		Health Care Busines	•	-			
		Single Asset Real Es	•		§ 101(51B)))	
		Stockbroker (as defined Commodity Broker (as		•	(6))		
		None of the above	as deimed in	11 0.3.6. 9 101((0))		
debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am not filing under Chapter I am filing under Chapter the Bankruptcy Code. I am filing under Chapter Bankruptcy Code.	r 11, but I am			_	
irt 4: Report if You Own	or Have	Any Hazardous Prop	erty or Any	Property Tha	nt Needs	Immediate i	Attention
Do you own or have any	☑ No						
property that poses or is alleged to pose a threat	Yes.	What is the hazard?			***************************************	ed to take day to a state of the state of th	
of imminent and identifiable hazard to							
public health or safety?			***************************************				
Or do you own any property that needs		if immediate are are		.:			
immediate attention?		If immediate attention is	s needed, why	y is it needed? _			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?						na Maria de Maria de Arte discribir de servicio de servicio de servicio de servicio de servicio de servicio de	while the blacker has blacker made to while the blacker has blacker has the blacker has been blacker.
		Where is the property?	Number	Street			**************************************
			Mannel	Sueet			
				 			
			City	·		State	ZIP Code
			∪ity			Q(2)(C	∠: ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 5 of 61

Debtor 1

DAVID

Α

WAUGH

Case number (if known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1	
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You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

i am	not	required	to rec	ceive a	briefing	about
cred	it co	ounseling	beca	use of	:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	bout
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 6 of 61 Document

Debtor 1	DAVID A First Name Middle Nam	WAUGH e Lasi Name	Case number (#.	known)
Part 6:	Answer These Ques	stions for Reporting Purpos	es	
	t kind of debts do have?	16a. Are your debts primar as "incurred by an individu	rily consumer debts? Consumer de al primarily for a personal, family, or ho	ebts are defined in 11 U.S.C. § 101(8) susehold purpose."
you	iave:	No. Go to line 16b. Yes. Go to line 17.		
			rily business debts? Business debt	
		No. Go to line 16c. Yes. Go to line 17.		
			u owe that are not consumer debts or b	usiness debts.
	ou filing under oter 7?	No. I am not filing under Ch	партия 7. Go to line 18.	And Control of the Co
Do ye any e exclu admi are p avail	ou estimate that after exempt property is uded and inistrative expenses eaid that funds will be able for distribution asecured creditors?		er 7. Do you estimate that after any exe es are paid that funds will be available t	
8. How	many creditors do estimate that you	✓ 1-49✓ 50-99✓ 100-199	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
a How	much do you	200-999 \$0-\$50,000	\$1,000,001-\$10 million	un-monorate contract on the contract of the co
estin	nate your assets to orth?	\$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	much do you nate your liabilities ?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7:	Sign Below	- \$350,001 Filmost	4100,000,001-4000 ITHRION	was wore train 450 binion
For you		I have examined this petition, ar correct.	nd I declare under penalty of perjury that	at the information provided is true and
			napter 7, I am aware that I may proceed I understand the relief available under e	I, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed
			d I did not pay or agree to pay someone and read the notice required by 11 U.S	e who is not an attorney to help me fill out .C. § 342(b).
		I request relief in accordance wi	ith the chapter of title 11, United States	Code, specified in this petition.
			ult in fines up to \$250,000, or imprisonn	ng money or property by fraud in connection nent for up to 20 years, or both.
		Signature of Debtor 1	no Jean Loughtx	ure of Debtor 2
		Executed on 08/0\$ /2017	Execute	ed on

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 7 of 61

Debtor 1

DAVID A

WAUGH

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action consequences?	on with long-term financial and legal
□ No ☑ Yes	
Are you aware that bankruptcy fraud is a serious crime a inaccurate or incomplete, you could be fined or imprison	
☐ No ☐ Yes	
Did you pay or agree to pay someone who is not an atto 2 No	rney to help you fill out your bankruptcy forms?
Yes. Name of PersonAttach Bankruptcy Petition Preparer's Notice, Deck	aration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand the rist have read and understood this notice, and I am aware that attorney may cause me to lose my rights or property if I	nat filing a bankruptcy case without an
Denth Haugh by Trees Lay PoAx	
Signature of Debtor 1	Signature of Debtor 2
Date 08/04/2017 MM / DD / YYYY	Date MM / DD / YYYY
Contact phone (708) 275-5075	Contact phone
Cell phone	Cell phone
Email address TWAUGH2@SBCGLOBAL.NET	Email address

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 8 of 61

Debtor 1	DAVID	Α	WAUGH
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filing	First Name	Middle Name	Last Name
nited States	Bankruptcy Court for	the: Northern District of II	linois
ase number			
asc isamber			

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. Part 11: Summarize Your Assets	u schedules after you file
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	
1c. Copy line 63, Total of all property on Schedule A/B	\$ 160,000.00
Part 2: Summarize Your Liabilities	
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,509.00
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,014.00

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 9 of 61 Document DAVID WAUGH Dehtor 1 Case number (it known) Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ☑ Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 1,851.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 0.00 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

0.00

0.00

0.00

0.00

0.00

	Case 17-236		Document	Page 10 of 61	Desc Main
Fill in this i	nformation to identify		Document	Page 10 01 01	
Debtor 1	DAVID First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	District of	f		
Case number (If known)	r	· · · · · · · · · · · · · · · · · · ·			
(ii tolouri)					☐ Check if this is an
					amended filing
Officia	al Form 106D	ec			
					
Deci	laration A	bout an li	ndividual	Debtor's Schedule	S 12/15
If two mar	rried poople are filing	togothor both and			
				supplying correct information.	
You must	file this form whenev	er you file bankruptcy	schedules or amend	ded schedules. Making a false statement,	concealing property, or
vears, or	both. 18 U.S.C. && 152	, 1341, 1519, and 3571	with a bankruptcy ca I	se can result in fines up to \$250,000, or in	prisonment for up to 20
•		, , , , , , , , , , , , , , , , , , , ,	•		
EVEN THE SAME OF T	Site.				
	Sign Below				
AMONTO TO					
****	_				
		someone who is NOT	an attorney to help	you fill out bankruptcy forms?	
₩ No					
☐ Ye	s. Name of person			. Attach Bankruptcy Petition Preparer's Notice,	Declaration, and
				Signature (Official Form 119).	
Under	nonatty of notiver 1 de	nolozo that I barra was	141		
that the	ey are true and correc	t.	the summary and s	chedules filed with this declaration and	
l)a	A Milara bus	Ta : Wann On	A		
X DAY	ND A. WAUGH	Facilians, Po	'` x		
Signati	ure of Debtor 1		Signature of Det	otor 2	
*					
	08/04/2017		Date		
	MM / DD / YYYY		MM / DD /	YYYY	

Date MM / DD / YYYY

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main

	Document Page 11 of 61		
Fill in this information to identify your case and th	is filing:		
Dahrand DAVID A WAUGI			
Debtor 1 DAVID A WAUGH	Last Name		
Debtor 2 Spouse, if filing) First Name Middle Name			
	Last Name		
Inited States Bankruptcy Court for the: Northern District of	f Illinois		
Case number		I	☐ Check if this is a
		,	Oneck if this is a amended filing
Official Form 106A/B			ū
	4		
Schedule A/B: Propert	i y		12/15
category where you think it fits best. Be as comp responsible for supplying correct information. If n write your name and case number (if known). Ans lart 1: Describe Each Residence, Building	nore space is needed, attach a separate sheet t	o this form. On the top of	any additional pages
Do you own or have any legal or equitable interes	est in any residence building land or similar r	roperty?	
☐ No. Go to Part 2.	set in any residence, banding, land, or similar p	roperty?	
Yes. Where is the property?			
1.1. 23000 WESTWIND DRIVE Street address, if available, or other description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured c the amount of any secure Creditors Who Have Clai	ed claims on <i>Schedule D</i>
	✓ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land	Current value of the entire property? \$ 137,000.00	Current value of the portion you own? \$ 145,000.00
RICHTON PARK IL 60471 City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other TOWNHOME	Describe the nature interest (such as fee	simple, tenancy by
	Who has an interest in the property? Check of	 the entireties, or a life 	e estate), if known.
COOK	Debtor 1 only		
County	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	ommunity property
	Other information you wish to add about thi	is item, such as local	
If you own or have more than one, list here:	property identification number:		
1.2Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured clithe amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Officer address, if available, of other description	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	☐ Land ☐ Investment property	\$	\$
City State ZIP Code	Timeshare	Describe the nature of	of your ownership
City State ZIP Code	Other	interest (such as fee the entireties, or a life	simple, tenancy by e estate), if known
	Who has an interest in the property? Check on-		
	Debtor 1 only		
County	Debtor 2 only		

Debtor 1 and Debtor 2 only

lacksquare At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

☐ Check if this is community property

(see instructions)

Debto			Filed 08/09/17 Entered 08/09/17 : GBocument Page 12 of Selnumber #		
1.	3. Street address, if availab	ole, or other description State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? Describe the nature of interest (such as fee the entireties, or a life.)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ of your ownership simple, tenancy by
	County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	Check if this is co (see instructions)	mmunity property
2. Add you	i the dollar value of the u have attached for Part	portion you own for a 1. Write that number I	Il of your entries from Part 1, including any entries	s for pages	\$145,000.00
you ow 3. Car	u own, lease, or have leg in that someone else drive s, vans, trucks, tractors	gal or equitable interes	st in any vehicles, whether they are registered or re, also report it on <i>Schedule G: Executory Contracts a</i>	not? Include any vehicles and Unexpired Leases.	
3.1.	Make: Model: Year: Approximate mileage: Other information:	NISSAN 350Z 2004 160000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secured Creditors Who Have Claim Current value of the entire property?	claims on Schedule D: s Secured by Property. Current value of the portion you own?
If yo 3.2.	ou own or have more than Make:	NISSAN	Check if this is community property (see instructions) Who has an interest in the property? Check one.	\$ 2,500.00 Do not deduct secured claim the amount of one secured	
	Model: Year: Approximate mileage: Other information:	2005 128000	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 3,000.00	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$ 3,000.00
			instructions)		

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 13 of 1 Inst Name Page 13 of 1 Inst Na

Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Current value of the entire property? \$	d claims on Schedule D: ms Secured by Property.
☐ At least one of the debtors and another ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions) TVs and other recreational vehicles, other vehicles, and access	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	portion you own? \$
Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ad claims on Schedule D: ans Secured by Property. Current value of the portion you own?
instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ad claims on Schedule D: ans Secured by Property. Current value of the portion you own?
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) TVs and other recreational vehicles, other vehicles, and access	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) TVs and other recreational vehicles, other vehicles, and access	Current value of the entire property?	ms Secured by Property. Current value of the portion you own?
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) TVs and other recreational vehicles, other vehicles, and access	entire property?	
At least one of the debtors and another Check if this is community property (see instructions) TVs and other recreational vehicles, other vehicles, and access	\$	
Check if this is community property (see instructions) TVs and other recreational vehicles, other vehicles, and access	\$	\$
instructions) TVs and other recreational vehicles, other vehicles, and access	\$	\$
Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secured	d claims on Schedule D:
nere:		
Who has an interest in the property? Check one. Debtor 1 only		claims on Schedule D:
· · · · · · · · · · · · · · · · · · ·		Command and 550
Debtor 2 only	Current value of the	Current value of the
· · · · · · · · · · · · · · · · · · ·	Current value of the entire property?	current value of the portion you own?
_	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) here: Who has an interest in the property? Check one.	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check if the amount of any secured claim Current value of the entire property? Summary Check one. Do not deduct secured claim Debtor 1 only Current value of the entire property?

5.

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 14 of Selnumber (# known)

Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current val portion you Do not deduc or exemptions	own? t secured claims
6.	Household goods and furnishings	·	
	Examples: Major appliances, furniture, linens, china, kitchenware		
	<u> No</u>		
	Yes. Describe Major appliances, furniture, linens, china, kitchenware	\$	4,000.00
7.	Electronics	l	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	☐ No ☐ Yes. Describe Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	\$	1,500.00
8.	Collectibles of value	u.ř	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	☑ No ☐ Yes. Describe	\$	
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	☑ No		
	Yes. Describe	\$	
10.	Firearms	l	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment No		
	Yes. Describe	\$	
11.4	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories \[\bigcup \text{No} \]		
	Yes. Describe Everyday clothes, furs, leather coats, designer wear, shoes, accessories	\$	4,000.00
12.	Jewelry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	No Yes. Describe	\$	
3, 1	Non-farm animals	!	
	Examples: Dogs, cats, birds, horses		
	No process and the same of the	}	
	Yes. Describe	\$	
	Any other personal and household items you did not already list, including any health aids you did not list		
	No No		
	Yes. Give specific information	\$	
5. /	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$	9,500.00
1	for Part 3. Write that number here	w	

Ase 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 15 of Selnumber (# known)

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	Lr.			ų,	в.		п	

Describe Your Financial Assets

Do you own or have an	y legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you	ı have in your wallet, in your ho	ne, in a safe deposit box, and on hand when you fi	le vour petition	
2 No	, ,	,	o your poutour	
☐ Yes			Cash:	\$
17. Deposits of money Examples: Checking, and others	savings, or other financial acco	unts; certificates of deposit; shares in credit unions, nultiple accounts with the same institution, list each	brokerage houses,	
2 No				
☐ Yes		Institution name:		
	17.1. Checking account:			\$
	17.2. Checking account:			\$
	17.3. Savings account:	-		\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:	V		\$
	17.6. Other financial account:		***************************************	\$
	17.7. Other financial account:		***************************************	\$
	17.8. Other financial account:			\$
	17.9. Other financial account:	the state of the s		\$
18. Bonds, mutual funds,	or publicly traded stocks			
	investment accounts with broke	erage firms, money market accounts		
☑ No ☐ Yes	Institution or issuer name:			
				\$ \$
				\$
19. Non-publicly traded s an LLC, partnership, a	tock and interests in incorpor and joint venture	rated and unincorporated businesses, including	an interest in	
☑ No	Name of entity:	%	of ownership:	
Yes. Give specific information about)%%	\$
them)%%	\$
)%%	\$

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 16 of first Name Middle Name Last Name Page 16 of first Name Middle Name Last Name

Negotiable instruments include pers Non-negotiable instruments are those Non-negotiab	se you cannot transfer ne: Keogh, 401(k), 403(b) count: Institution na	to someone by signing to someone by signing to someone by signing to some by signing to s	g or delivering them.		\$\$ \$
☐ Yes. Give specific information about them	Keogh, 401(k), 403(b) count: Institution na	, thrift savings accoun			
Retirement or pension accounts Examples: Interests in IRA, ERISA, No Yes. List each account separately. Type of accounts Pension pla IRA: Retirement a	Keogh, 401(k), 403(b) count: Institution na	, thrift savings accoun			
Information about them	Keogh, 401(k), 403(b) count: Institution na	, thrift savings accoun			
Retirement or pension accounts Examples: Interests in IRA, ERISA, No Yes. List each account separately. Type of acc 401(k) or sir Pension pla IRA: Retirement a	Keogh, 401(k), 403(b) count: Institution na	, thrift savings accoun			
Examples: Interests in IRA, ERISA, No Yes. List each account separately. Type of acc 401(k) or sin Pension pla IRA: Retirement a	Keogh, 401(k), 403(b) count: Institution na	, thrift savings accoun			\$
Examples: Interests in IRA, ERISA, No Yes. List each account separately. Type of account separately. Pension plates. IRA: Retirement accounts.	Keogh, 401(k), 403(b) count: Institution na	, thrift savings accoun			\$
Examples: Interests in IRA, ERISA, No Yes. List each account separately. Type of acc 401(k) or sin Pension pla IRA: Retirement a	count: Institution na	ame:	s, or other pension or pro	ofit-sharing plans	
No Yes. List each account separately. Type of account separately. 401(k) or sin Pension plants: Retirement account separately.	count: Institution na	ame:	is, or other pension or pro	ofit-sharing plans	
Yes. List each account separately. Type of account separately. 401(k) or sin Pension plate. IRA: Retirement accounts.	milar plan:				
account separately. Type of acc 401(k) or sir Pension pla IRA: Retirement a	milar plan:				
Pension pla IRA: Retirement :					
Pension pla IRA: Retirement :					\$
IRA:					
Retirement a					\$
					\$
Keogh:	account:	4			\$
•					\$
Additional a	ccount:			W-1874 W-4	\$
Additional a	ccount:				e
Examples: Agreements with landlord companies, or others No	ls, prepaid rent, public	utilities (electric, gas,	water), telecommunicatio	ons	
☐ Yes	Institution name	or individual:			
Electric:					\$
Gas:					\$
Heating oil:	***************************************				\$
					\$
Prepaid rent					\$
Telephone:		AMM. No. 100 100 100 100 100 100 100 100 100 10			\$ <u></u>
Water:					\$
Rented furnit	ture:				\$
Other:					\$
Annuities (A contract for a periodic p	ayment of money to ye	ou, either for life or for	a number of years)		
☑ No					
57 .	and description:				
					\$

ase 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Name Middle Name Last Name Page 17 of 64 number (# known)

24. Interests in an education IR 26 U.S.C. §§ 530(b)(1), 529A	A, in an accoun	nt in a qualified ABLE pro	ogram, or under a qualified s	tate tuition program.	
2 No	(b), and 020(b)(17.			
Yes	Institution nam	ne and description. Separa	ately file the records of any inte	erests.11 U.S.C. § 521	(c):
					•
					\$
					\$
					\$
25. Trusts, equitable or future in exercisable for your benefit	nterests in prop	perty (other than anythin	g listed in line 1), and rights	or powers	
☑ No					
Yes. Give specific		······································			announce of
information about them	P. SARAANNA				\$
26. Patents, copyrights, tradem Examples: Internet domain na ✓ No	arks, trade seci	rets, and other intellectu	al property		namunik
☐ Yes. Give specific			re per per per per per per per per per p		non-read and
information about them					\$
			regard of the fact of the fine of the first of the first one time of the first of the first of the first one time time time of the first of the first one time time time time time time time tim		
27. Licenses, franchises, and o			hadding to the		
Examples: Building permits, e	xciusive licenses	s, cooperative association	noidings, liquor licenses, profe	ssional licenses	
* ***					
Yes. Give specific information about them					s
Money or property owed to you 28. Tax refunds owed to you					Current value of the portion you own? Do not deduct secured claims or exemptions.
☑ No					
Yes. Give specific informa	tion			_	_
about them, including	whether			Federal:	\$
you already filed the and the tax years	returns			State:	\$
,	W middle			Local:	\$
29. Family support Examples: Past due or lump s ☑ No ☐ Yes. Give specific informat	100.00.00	usal support, child suppor	t, maintenance, divorce settlen	nent, property settleme	ent
	SPECIAL LA LATE			Alimony:	\$
			* Constitution of the Cons	Maintenance:	\$
				Support:	\$
				Divorce settlement:	\$
	<u></u>			Property settlement:	\$
	ability insurance p	payments, disability benef ns you made to someone	its, sick pay, vacation pay, wo else	rkers' compensation,	
☑ No	-		евийн ин интинитин и и и и и и и и и и и и и	h fright a 1.1 a mh ann ann ann ann an an an an an an an an	omag
Yes. Give specific informat	ion				
					\$

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Name Middle Name Last Name Page 18 of 61 number (# known)

31.	Interests in insurance policies Examples: Health, disability, or life insuran ✓ No	ce; health savings account (HS	SA); credit, homeowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				¢
				D
		· · · · · · · · · · · · · · · · · · ·		\$
				\$
	property because someone has died.		rance policy, or are currently entitled to receive	
	No City of the cit			the meditation to age
	Yes. Give specific information			e
	!			\$
33.	Claims against third parties, whether or Examples: Accidents, employment dispute:	not you have filed a lawsuit of sinsurance claims, or rights to	or made a demand for payment sue	
	No Described to the second			
	Yes. Describe each claim.			\$
	Other contingent and unliquidated claim to set off claims Mo			
	Yes. Describe each claim.			·
				\$
	Any financial assets you did not already No Yes. Give specific information			\$
36.	Add the dollar value of all of your entries for Part 4. Write that number here	from Part 4, including any e	ntries for pages you have attached	\$
			wn or Have an Interest In. List any r	eal estate in Part 1.
	Do you own or have any legal or equitable Do you own or have any legal or equitable	e interest in any business-re	lated property?	
	Yes. Go to line 38.			
,	Tes. Go to mie 36.			Current value of the portion you own? Do not deduct secured claims or exemptions.
8. 🖊	Accounts receivable or commissions you	already earned		
	2 No			
Į	Yes. Describe			
				\$
E	Office equipment, furnishings, and suppl Examples: Business-related computers, software, No		chines, rugs, telephones, desks, chairs, electronic devices	
	Yes. Describe			Processing the state of the sta
•				\$
				aš

Debtor	1

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main WAUG Bocument Page 19 of 61 number (if known)

☑ No	equipment, supplies you use in business, and tools of your trade		
Yes. Describe			\$
nventory			
∡ No			
Yes. Describe			\$
nterests in partners!	nips or joint ventures	a'r ar feinifein a maeigen an a gane gan gyr	metro and
Z No			
Yes. Describe	Name of entity: % of ov		
	% OT OV	vnership:	
		%	\$
		_%	\$
		_%	\$
No	ng lists, or other compilations sinclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
□ No			
Yes. Des	cribe		Articular study
			\$
ny business-related No Yes. Give specific information	property you did not already list		\$
			\$
			\$
		***************************************	\$
			\$
		····	\$
dd the dollar value o	of all of your entries from Part 5, including any entries for pages you have attached number here	→	\$ 0.0
6 Describe A	ny Farm- and Commercial Fishing-Related Property You Own or Have an Ir have an interest in farmland, list it in Part 1.	iterest l	n.
lf you own o			
you own or have a	ny legal or equitable interest in any farm- or commercial fishing-related property?		
you own or have a	ny legal or equitable interest in any farm- or commercial fishing-related property?		
you own or have a No. Go to Part 7. Yes. Go to line 47.			portion you own?
If you own or have a No. Go to Part 7. Yes. Go to line 47.	ny legal or equitable interest in any farm- or commercial fishing-related property? oultry, farm-raised fish		portion you own? Do not deduct secured claims
you own or have a No. Go to Part 7. Yes. Go to line 47. arm animals kamples: Livestock, p			portion you own? Do not deduct secured claims
If you own of you own or have a No. Go to Part 7. If Yes. Go to line 47. If you own or have a not h			portion you own? Do not deduct secured claims

Crops—either growing or harvested Value Ves. Give specific information	\$\$\$
Yes. Give specific information	\$\$\$
Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	\$\$ s
Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No	\$\$ s
No	\$
Parm and fishing supplies, chemicals, and feed No Pes Any farm- and commercial fishing-related property you did not already list No Pes. Give specific information. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not Lis Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Pes. Give specific information	\$
Farm and fishing supplies, chemicals, and feed	\$
Farm and fishing supplies, chemicals, and feed No Yes	\$
No Yes	\$
Any farm- and commercial fishing-related property you did not already list Yes	\$
Any farm- and commercial fishing-related property you did not already list No	\$
Any farm- and commercial fishing-related property you did not already list No Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not Lis Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information.	\$
Yes. Give specific information. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here To Describe All Property You Own or Have an Interest in That You Did Not Lis Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Yes. Give specific information.	ed \$ 0.
Yes. Give specific information	ed \$ 0.
Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not Lis Oo you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information.	ed \$ 0.
Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not Lis Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information	→ [\$
Describe All Property You Own or Have an Interest in That You Did Not Lis Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information.	→ [\$
Describe All Property You Own or Have an Interest in That You Did Not Lis Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information	I
Add the dollar value of all of your entries from Part 7. Write that number here	Manual Control of the
t 8: List the Totals of Each Part of this Form	I
art 1: Total real estate, line 2	→ \$ 145,000.00
art 2: Total vehicles, line 5 \$	
art 3: Total personal and household items, line 15 \$ 9,500.00	
art 4: Total financial assets, line 36 \$	
art 5: Total business-related property, line 45 \$	
art 6: Total farm- and fishing-related property, line 52 \$	
art 7: Total other property not listed, line 54 +s	

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 21 of 61 Document Fill in this information to identify your case: DAVID WAUGH Debtor 1 First Name Middle Nam Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an (If known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☑ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief CONDO/TOWNHSE \$ 137,000.00 735-5/12-901, 735-5/12-906 **2** \$ 15,000.00 description: 100% of fair market value, up to Line from 1.1 Schedule A/B: any applicable statutory limit Brief MOTOR VEHICLE \$2,500.00 **2** \$ 1,200.00 735-5/121001(c) description: 100% of fair market value, up to Line from 3.1_ Schedule A/B: any applicable statutory limit Brief **MOTOR VEHICLE** \$3,000.00 **2** \$ 1,200.00 735-5/121001(c) description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3.2 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) M No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main DAVID A Document GH Page 22 of 61 number (# known) Last Name Last Name

Part 2: **Additional Page**

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own		Amount of the exemption you claim	Specific laws that allow exemption
			he value from ule A/B	Check only one box for each exemption	
Brief description:	CLOTHING ITEMS	\$	4,000.00	∡ \$ 4,000.00	735-5/12-1001(a)
Line from Schedule A/B:	3.11			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	PERSONAL PRO	\$	2,500.00	∡ \$ <u>1,500.00</u>	735-5/12-1001(b)
Line from Schedule A/B:	3.7			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		 \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	1 1000
Brief description:		\$		u s	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	West all and the second	\$		<u></u> s	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		- \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$			
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	···	<u> </u>	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$			
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$			
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		<u></u> \$	
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description:		\$			
Line from Schedule A/B:	······································			☐ 100% of fair market value, up to any applicable statutory limit	

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 23 of 61 Document

Debtor 1	DAVID	Α	WAUGH
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filin	g) First Name	Middle Name	Last Name
, , ,	0,	Middle Name the: Northern District of I	

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do any	creditors	have (claims	secured	by	your	property?	?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

for each claim. If more than one creditor. As much as possible, list the claims in alp	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. shabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
DITECH FINANCIAL, LLC	Describe the property that secures the claim:	_{\$} 145,000.00	s0.00 g	0.00
Creditor's Name P.O. BOX 6154 Number Street	CONDO/TOWNHOME-PRIMARY RESIDENCE			
RAPID CITY SD 55709	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	-		
community debt Date debt was incurred 05/03/0200	Last 4 digits of account number 8 2 2 3			
GREENFIELD TWNHM ASSOC Creditor's Name	Describe the property that secures the claim:	\$5,474.00	\$\$	0.00
P.O. BOX 856 Number Street	ARREARAGE OF TOWNHOME ASSOC. FEES			
RICHTON PARK IL 60471	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
, out in code				
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
, out in code	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54

Debtor 1

DAVID

First Name

Document

Page 24 of 61 Case number (if known

Desc Main

Additional Page Column A Column B Column C Part 1: Amount of claim Value of collateral After listing any entries on this page, number them beginning with 2.3, followed Unsecured that supports this Do not deduct the portion by 2.4, and so forth. claim value of collateral. If any **CODELLIS & ASSOCIATES** Describe the property that secures the claim: 4,500.00 0.000.00 15W030 N. FRONTAGE ROAD PRIMARY RESIDENCE-23000 Number Street WESTWIND DR. **STE 100** As of the date you file, the claim is: Check all that apply. **BURR RIDGE** IL 60527 Contingent Unliquidated State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 8 2 2 3 DITECH FINANCIAL, LLC 12,753.00 0.00 s Describe the property that secures the claim: 0.00 Creditor's Name P.O. BOX 6154 CONDO/TOWNHOME-PRIMARY RESIDEN Number As of the date you file, the claim is: Check all that apply. Contingent RAPID CITY IL 60471 Unliquidated Cify State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent City ☐ Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Enter that number here: 17,253.00 If this is the last page of your form, add the dollar value totals from all pages. 167,727.00 Enter that number here:

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 25 of 61

Debtor 1

Case number (if known)

List Others to be Notified for a bebt first You Already Listed	
	-
Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection	¥ .
and the same of th	A. j. V
agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly,	if
you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons	
notified for any debte in Daniel de additional persons	to

b	e notified for	r any debts in Part 1, do not fill	out or submit I	his page.	and the second of the second o
		LIS & ASSOCIATES			On which line in Part 1 did you enter the creditor? 2.1
		NORTH FRONTAGE F	ROAD		Last 4 digits of account number 8 2 2 3
	Number STE 10	Street 0			
	BURR F	RIDGE	IL	60527	
	City	llater Block (Arthur Arthur Core Core Core Core Core Core Core Cor	State	ZIP Code	- Values transport to the contract and t
	Name				On which line in Part 1 did you enter the creditor?
					Last 4 digits of account number
	Number	Street	- 4-00004		

	City		State	ZIP Code	
	e Pertua In success magnicula compresente	Appendix of the constitution of the specified of the specifies at a sender state of the Appendix Appendix (the specifies as the specifies), and the specifies (the specifies as the specifies), and the specifies (the specifies as the specifies	e kanada na antana pana ana ana kanada na panahan na nanaka ha ana katawa.	retherinate letter for the treatment of a section dependent on a foreign being the emperior designed for the	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
					
	City vacassammassammas	રાષ્ટ્ર નામભાગાની આવેલા સાથે કરો કરોના ભાગ નામના અને અંગલે અને સાથે સાથે તેના કે ત્યાં આવેલા કે તેના સાથે સાથે	State	ZIP Code	
	Name			y and the state of	On which line in Part 1 did you enter the creditor?
	Manie				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
	P. S. C.	Month of the Control of the Anni Persistent & 19 section Anni Control of the Control of the Anni Control of the Control of the Anni Control of the	No heavel (Villiand Maleida) (See Lee Lee Arguet SACLAND AND AND A	KILLER O 1933 HIBANDAY JANDONIS A KARABANI AKARBANI YA GI HANNA BALUPIS AYSI ANIANI KANDANIKA Z	On which line in Part 1 did you enter the creditor?
	Name	With the title of the second o		***************************************	Last 4 digits of account number
	Number	Street	***************************************	9.00 Mar 6	
		The state of the s	7107141.1		
	City	. The state of the			
7	City ************************************	જેવાજું એક જેવાજી જાતા કર્યા છે. ત્યા જેવાજુ જેવાજી જેવાજી જેવાજી જેવાજી જેવાજી અને જેવાજી જેવાજી જેવાજી જેવાજ જેવાજું એક જેવાજી જ	State	ZIP Code	
	Name	ANTONIO L	7-7-7-1		On which line in Part 1 did you enter the creditor?
					Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					and the second s

F	Case 17-23816 ill in this information to identify you	Doc 1 our case:	Filed 08/09/17	Entered 08/09/17 1 of 61	5:25:54	Desc M	1ain
	Debtor 1 DAVID	А	WAUGH				
	First Name	Middle Name	Last Name				
, -	Spouse, if filing) First Name	Middle Name	Last Name				
U	inited States Bankruptcy Court for the: No	orthern Distric	ct of Illinois				
	ase number f known)						Check if this is an amended filing
0	fficial Form 106E/F						
S	chedule E/F: Cred	litors \	Who Have U	nsecured Clair	ms		12/15
A/E cre- nee any	as complete and accurate as poss t the other party to any executory 3: Property (Official Form 106A/B); ditors with partially secured claim ded, copy the Part you need, fill it additional pages, write your name List All of Your PRIORI	contracts or and on Sche s that are lis out, numbe e and case n	unexpired leases that of dule G: Executory Control ted in Schedule D: Cred r the entries in the boxenumber (if known).	could result in a claim. Also tracts and Unexpired Leases ditors Who Have Claims Secu	list executor (Official For ured by Prop	y contracts, m 106G). Do	on Schedule not include any
	Do any creditors have priority uns No. Go to Part 2. Yes.	ecured clair	ns against you?				
2.	List all of your priority unsecured each claim listed, identify what type on nonpriority amounts. As much as pounsecured claims, fill out the Continu (For an explanation of each type of continuation).	or claim it is. ssible, list the lation Page o	r a claim has both priority claims in alphabetical or f Part 1. If more than one	y and nonpriority amounts, list to der according to the creditor's in creditor holds a particular clair	hat claim her name. If you l n, list the oth	e and show the have more the er creditors in	ooth priority and lan two priority n Part 3.
					Total clair	m Priori amou	
2.1	INTERNAL REVENUE SRV	/C.	Last 4 digits of accou	ınt number 2 0 6 8	\$ <u>1,224</u>	.00 \$ 1.22	4.00 \$ 0.00
	DEPARTMENT OF THE TEN	REASURY	When was the debt in	4040445		,	
	310 ANDOVER MA	01810		e, the claim is: Check all that appl	y.		
	City State	ZIP Code	Contingent Unliquidated				
	Who incurred the debt? Check one.		Disputed				
	Debtor 1 only Debtor 2 only			management abolism			
	Debtor 1 and Debtor 2 only		Type of PRIORITY u Domestic support of				
	At least one of the debtors and anoth			ongations ther debts you owe the government			
	☐ Check if this claim is for a comm	nunity debt	Claims for death or j	personal injury while you were			
	Is the claim subject to offset?		intoxicated	· · · · · · · · · · · · · · · · · · ·			
	Yes		Calci. Specify	117000-011	-		
2.2			Last 4 dinite of account	nt number		Assessed Assessed to the Section of	
	Priority Creditor's Name		When was the debt in	nt number	\$	<u> </u>	<u> </u>
	Number Street			With the control of t			
				, the claim is: Check all that apply	<i>I</i> .		
	City State	ZIP Code	☐ Contingent☐ Unliquidated				
	Who incurred the debt? Check one.		Disputed				
	Debtor 1 only Debtor 2 only		Type of PRIORITY ur	nsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only		Domestic support ob	ligations			
	At least one of the debtors and anoth	er		her debts you owe the government			
	☐ Check if this claim is for a comm	unity debt	Claims for death or p intoxicated	ersonal injury white you were			
	Is the claim subject to offset? No Yes		Other. Specify				
	· · · · · · · · · · · · · · · · · · ·	*****************					

DAMSE 17-23816 ADOC 1 Filed QRAQR417 Entered 08/09/17 15:25:54 Desc Main Page 27 of 61 Page 27 of 61

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

Afi	er listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
		When was the debt incurred?			
	Number Street	- American A			
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	Contingent			
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.	- Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify			
	Is the claim subject to offset?				
	No Yes				
					erica Cerisenianiingeriseigeri
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
	Mulipei Straet	An of the data was file the state to be			
		As of the date you file, the claim is: Check ail that apply.			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
	<u> </u>	Disputed			
	Who incurred the debt? Check one.	.,			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated 			
	•	Other. Specify			
	Is the claim subject to offset?				
	□ No □ Yes				
7	1 COLOR CONTROL CONTRO			TA-THE CONTRACTOR SPECIAL CONTRACTOR CONTRAC	WWW.PSPRONINGPOLICECONSTRUCTURES
J	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	, nong Greator's Name	When was the debt incurred?			
	Number Street	when was the dept incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			:
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
		Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other. Specify	hydra En archestharth a pa esh-y apochasticac Cartinestha et a sion	kurusan unkonan kurup keskulok estaksika katalan kuruk kata	nainey kiney kinek ki ki ki ki ki ki da ada da da kine naine kine kine kine kine kine kine kine k
	Is the claim subject to offset?				
	□ No				
	☐ Yes				

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First Name Middle Name Last Name Document

Entered 08/09/17 15:25:54 Desc Main Page 28 of 61 Page 28 of 61 Desc Main

Part 2:

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsection. No. You have nothing to report in this property yes.									
4.	List all of your nonpriority unsecured cla nonpriority unsecured claim, list the credito included in Part 1. If more than one creditor claims fill out the Continuation Page of Part	r separ r holds	ately for each cli	aim. For each claim listed, identify wh	at tung of claim it is. Do no	it liet alai	ma alesado			
	_					Tota	l claim			
4.1	TCF NATIONAL BANK			Last 4 digits of account number						
	Nonpriority Creditor's Name			When was the debt incurred?	12/01/2011	\$	1,171.57			
	8690 EAST POINT DOUGLAS R	OAD,	SOUTH	when was the dept incurred?	12/01/2011					
	COTTAGE GROVE M	IN_	55016	A = 64b = d=4 = === 60b = 44 = == 4.	• • • • • • •					
	Only Sta	te	ZIP Code	As of the date you file, the claim	is: Check all that apply.					
	Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only			Contingent Unliquidated Disputed						
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim:						
	Check if this claim is for a community	4.5.		Student loans Obligations existing out of a country to the countr						
	Is the claim subject to offset?	debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	✓ No Yes			Debts to pension or profit-sharing Other. Specify DEBT FROM	plans, and other similar debt M BANK ACCOUNT	\$				
4.2	CITI	- Control of the Cont		Last 4 digits of account number	3 6 4 1	**************************************	1,827.22			
·	Nonpriority Creditor's Name				02/01/2003	Ψ				
	P.O. BOX 7900400 Number Street									
	Number Street ST LOUIS MO	0	63179	As of the date you file, the claim	is: Check all that apply					
	City State		ZIP Code	☐ Contingent	The street and the st					
	Who incurred the debt? Check one.			Unliquidated			:			
	Debtor 1 only			Disputed						
	Debtor 2 only			Type of NONPRIORITY unsecu	rod alaim:					
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans	reu ciaim:					
	Check if this claim is for a community of	debt		Obligations arising out of a separa that you did not report as priority of	ation agreement or divorce					
	Is the claim subject to offset? ☑ No ☐ Yes			Debts to pension or profit-sharing Other. Specify CITICARD D	plans, and other similar debts					
.3	VILLAGE OF CALUMET PARK	SPECIAL CONTROL CONTRO	to material from the first the district of the control of the cont	Last 4 digits of account number	industrial industrial metalonic commentation in the contract of the contract o	int terminal international internations, and	MACHINE METERS PROPERTY OF THE			
	Nonpriority Creditor's Name			When was the debt incurred?	0 _1 _0 _1	\$	175.00			
	12419 SOUTH ASHLAND AVENU	JE		-			:			
	CALUMET PARK IL State)	60827 ZIP Code	As of the date you file, the claim i	s: Check all that apply.					
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only			☐ Contingent☐ Unliquidated☐ Disputed☐						
	Debtor 1 and Debtor 2 only			Tune of MONDESONIES						
	At least one of the debtors and another			Type of NONPRIORITY unsecun	ed claim:		:			
	☐ Check if this claim is for a community d	lebt		Student loansObligations arising out of a separa	tion agreement or divorce					
	Is the claim subject to offset?			that you did not report as priority of	aims					
	□ No			☐ Debts to pension or profit-sharing p ☐ Other. Specify <u>STANDING/</u>	plans, and other similar debts					
	Yes			Omer. Specify STANDING/	-ARRING HUKET					

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

er listing any entries on this page, numb	ber ther	n beginning wit	h 4.4, followed by 4.5, and so forth.	T	otal claim
	GRAM		Last 4 digits of account number 3 0 7 2	\$	100.00
P.O. BOX 577			When was the debt incurred? 03/08/2017		
BEDFORD PARK	L	60499	As of the date you file, the claim is: Check all that apply.		
Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		ZIP Code	 □ Contingent □ Unliquidated ☑ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify RED LIGHT CAMERA TICKET 		
	interioritate (sincipio de primero de la composición del composición de la composición del composición de la composició	erterntikks ung baging ind het Singling ind ind et Lioue dunts sooi		nemente de deserva	600.00
Nonpriority Creditor's Name				\$	000.00
	8		When was the debt incurred? 12/01/2014		
	L	60423	As of the date you file, the claim is: Check all that apply.		
		ZIP Code	☐ Contingent		
Who incurred the debt? Check one.			Unliquidated		
· · · · · ·			₩ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
			Student loans		:
■ At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		1
☐ Check if this claim is for a community	debt				
Is the claim subject to offset?			Other. Specify RED LIGHT CAMERA TICKET		
Wai Yes					
	-turnschaftering	eriteritera subilitationa ammentera en erromany en propriet (company especies		***************************************	366.00
CITY OF CHICAGO-CITY HALL			Last 4 digits of account number 2 2 9 4	*	 :
121 NORTH LASALLE STREET,	RM. 1	07A	When was the debt incurred? 01/01/2009		:
		60602	As of the date you file, the claim is: Check all that apply.		
City Stat	te	ZIP Code	Contingent		
Who incurred the debt? Check one.					
Debtor 1 only			₩ Disputed		:
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
			☐ Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as principly claims		
•	debt		Debts to pension or profit-sharing plans, and other similar debts		manana a hari-
is the claim subject to offset? No Yes			☑ Other. Specify PARKING/SPEED TICKETS		Maritim to 111
	PHOTO ENFORCEMENT PROD Nonpriority Creditor's Name P.O. BOX 577 Number Street BEDFORD PARK City St Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community Is the claim subject to offset? No Yes MCSI Nonpriority Creditor's Name 7330 COLLEGE DRIVE, STE 10 Number Street PALOS HEIGHTS III City Ste Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community Is the claim subject to offset? No Yes CITY OF CHICAGO-CITY HALL Nonpriority Creditor's Name 121 NORTH LASALLE STREET, Number Street CHICAGO IL City Sta Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 2 only City Sta CITY OF CHICAGO-CITY HALL Nonpriority Creditor's Name 121 NORTH LASALLE STREET, Number Street CHICAGO IL City Sta City	PHOTO ENFORCEMENT PROGRAM Nonpriority Creditor's Name P.O. BOX 577 Number Street BEDFORD PARK IL City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nopriority Creditor's Name 7330 COLLEGE DRIVE, STE 108 Number Street PALOS HEIGHTS IL City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No City State CITY OF CHICAGO-CITY HALL Nonpriority Creditor's Name 121 NORTH LASALLE STREET, RM. 1 Number Street CHICAGO IL Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Street CHICAGO IL North LASALLE STREET, RM. 1 Number Street CHICAGO IL City State Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 1 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 of the debtors and another Check If this claim is for a community debt Is the claim subject to offset? No	PHOTO ENFORCEMENT PROGRAM Nonpriority Creditor's Name P.O. BOX 577 Number Street BEDFORD PARK IL 60499 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No MCSI Nonpriority Creditor's Name 7330 COLLEGE DRIVE, STE 108 Number Street PALOS HEIGHTS IL 60423 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes CITY OF CHICAGO-CITY HALL Nonpriority Creditor's Name 121 NORTH LASALLE STREET, RM. 107A Number Street CHICAGO IL 60602 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only At least one of the debtors and another CHICAGO IL 60602 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Check if this claim is for a community debt State CHICAGO IL 60602 City State ZIP Code	Nonpercy Crestor's Name Size	PHOTO ENFORCEMENT PROGRAM Note that is compared to the compar

DAME 17-23816 ADOC 1 Filed 08/09/17

Entered 08/09/17 15:25:54 Desc Main Page 30 of 61

List Others to Be Notified About a Debt That You Already Listed

ALTRAN FINANCIAL, LP	On which entry in Part 1 or Part 2 did you list the original creditor?
ame	
5800 NORTH COURSE DRIVE	Line 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured Clain
HOUSTON TX 77072	Last 4 digits of account number 6 3 4 6
MERCHANT & MEDICAL CREDIT CORP.	On which entry in Part 1 or Part 2 did you list the original creditor?
324 TAYLOR DRIVE	Line 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims Claims
FLINT MI 48507 ty State ZIP Code	Last 4 digits of account number 0 4 4 7
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
y State ZIP Code	Last 4 digits of account number
nme	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
imber Street	Part 2: Creditors with Nonpriority Unsecured Claims
y State ZIP Code	Last 4 digits of account number
me	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
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me	On which entry in Part 1 or Part 2 did you list the original creditor?
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/ State ZIP Code	Last 4 digits of account number
ne	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
mber Street	☐ Part 2: Creditors with Nonpriority Unsecured

DATE: 17-23816 ADOC 1 Filed 0.8409617

Entered 08/09/17 15:25:54 Page 31 of 61

Desc Main

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$	1,224.00
	6c.	. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
; ;	6e.	. Total. Add lines 6a through 6d.	6e.	\$	1,224.00
				Total claim	
Total claims	6f.	Student loans	6f.	\$	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
A. P	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
		Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	0.00
A Aug	6j. *	Total. Add lines 6f through 6i.	6j.	\$	0.00

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 32 of 61 Document Fill in this information to identify your case: DAVID Α WAUGH Debtor First Name Middle Name Last Name Debtor 2 (Spouse If filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an (If known) amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. Person or company with whom you have the contract or lease State what the contract or lease is for 2.1 Name Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street

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Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main

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Case number (if known)_

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	Person	or company w	ith whom you	a have the contract or lease	What the contract or lease is for	
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Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main DAVID A DOCUMANTEH Page 35 of 61 Case number (if known)

Additional Page to List More Codebto

Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
3	Check all schedules that apply:
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	Schedule E/F, line
Number Street	Schedule G, line
City State ZIP Code	
3 Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	Schedule G, line
City State ZIP Code	
Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	Schedule G, line
City State ZIP Code	
	Schedule D, line
Name	Schedule E/F, line
Number Street	Schedule G, line
City State ZIP Code	
Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	Schedule G, line
City State ZIP Code	
Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	Schedule G, line
City State ZIP Code	
Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	
Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	Schedule G, line

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 36 of 61 Document Fill in this information to identify your case: DAVID WAUGH Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is: (If known) ☐ An amended filing A supplement showing postpetition chapter 13 income as of the following date: Official Form 1061 MM / DD / YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Employment** 1. Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one job, attach a separate page with **Employment status** ☐ Employed ☑ Employed information about additional employers. Not employed ■ Not employed Include part-time, seasonal, or self-employed work. CUSTOMER SRVC/SALES AGT Occupation Occupation may include student or homemaker, if it applies. Employer's name HILTON WORLDWIDE-HRCC Employer's address 7920 WOODLAND CENTER BL Number Street Number Street Tampa 33614 City State ZIP Code City State ZIP Code How long employed there? 2 YEARS Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be 2. 0.00 0.00 3. Estimate and list monthly overtime pay. 0.00 0.00 3. 4. Calculate gross income. Add line 2 + line 3. 0.000.00

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main

		F	or Debtor 1	For Deb non-filin	tor 2 or q spouse	
Copy line 4 here	→ 4.	\$	0.00	\$	0.00	
5. List all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a	\$	0.00	\$	0.00	
5b. Mandatory contributions for retirement plans	5b.			_	0.00	
5c. Voluntary contributions for retirement plans	5c.		0.00		0.00	
5d. Required repayments of retirement fund loans	5d.		0.00	- '———	0.00	
5e. Insurance	5e.	•	0.00	· · · · · · · · · · · · · · · · · · ·	0.00	
5f. Domestic support obligations	5f.	\$	0.00	. , , , , , , , , , , , , , , , , , , ,	0.00	
5g. Union dues	5g.	\$	0.00	-	0.00	
5h. Other deductions. Specify:	5g. 5h.	+\$	0.00	- ' <u></u>	0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	ı. 6 .	\$	0.00	s	0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	Ψ_ \$	0.00	· · · · · · · · · · · · · · · · · · ·	0.00	
	7.	.	0.00	. \$	0.00	
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	. \$ <u>.</u>	0.00	
8b. Interest and dividends	8b.	\$	0.00	\$	0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive		*_		*		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	0.00	
8d. Unemployment compensation	8d.	\$_	0.00	\$	0.00	
8e. Social Security	8e.	\$_	1,650.00	\$	0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce					
Specify:	8f.	\$	0.00	\$	0.00	
8g. Pension or retirement income	8g.	\$_	654.00	\$	0.00	
8h. Other monthly income, Specify: STATE RETIREMENT-DISA	8h.	+ \$_	1,205.00	+\$	0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	3,509.00	\$	0.00	
 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 	10.	\$_	3,509.00	+ \$	0.00	\$ 3,509.00
 State all other regular contributions to the expenses that you list in Scheolinclude contributions from an unmarried partner, members of your household, you friends or relatives. 			lents, your roo	mmates, and c	other	
Do not include any amounts already included in lines 2-10 or amounts that are Specify:	not av	ailabl	e to pay exper	nses listed in S	chedule J. 11. +	\$0.00
 Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S 	result	is the	combined mo	onthly income.		s 3,509.00
The same are defined by the rout Assets and Liabilities and Certain S	uausti	Jai INT	ormation, it it a	applies	12.	Combined
13. Do you expect an increase or decrease within the year after you file this f ✓ No.	orm?					monthly income
Yes. Explain:						

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 38 of 61

Fill in this information to identify	your case:				
Debtor 1 DAVID A First Name Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Case number (If known)	WAUGH Middle Name Last Name Middle Name Last Name District of		ended lement es as o	showing post of the following	petition chapter 13 g date:
Official Form 106J	Office Control of the	- 1 - 0.70 No. No. 100			
Schedule J: You	ur Expenses				12/15
Be as complete and accurate as poinformation. If more space is neede (if known). Answer every question. Part 1: Describe Your House	d, attach another sheet to this form	ng together, both are equally re i. On the top of any additional p	espons pages, 1	ible for supply write your nam	ing correct e and case number
	pelioid				
1. Is this a joint case? 1. Is this a joint case?	eparate household?				
No Ves. Debtor 2 must file	Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.			
2. Do you have dependents? Do not list Debtor 1 and Debtor 2.	No Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	and a subsequently of the	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	each dependent				No Yes No Yes No Yes No Yes
			· · · · · · · · · · · · · · · · · · ·		No Yes No Yes
Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoin	☑ No □ Yes Ig Monthly Expenses				
Estimate your expenses as of your le expenses as of a date after the bank applicable date.	pankruptcy filing date unless you a cruptcy is filed. If this is a suppleme	re using this form as a supplemental Schedule J, check the box	nent in at the	a Chapter 13 c top of the form	ase to report and fill in the
Include expenses paid for with non- such assistance and have included				Your exper	Neae
 The rental or home ownership ex any rent for the ground or lot. 		·	4.	\$	979.00
If not included in line 4:					*
4a. Real estate taxes			4a.	\$	0.00
4b. Property, homeowner's, or rei	nter's insurance		4b.	\$	0.00
4c. Home maintenance, repair, ar	nd upkeep expenses		4c.	\$	300.00
4d. Homeowner's association or o	condominium dues		41	\$	75.00

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 39 of 61

Middle Name

WAUGH Last Name

DAVID First Name

Debtor 1

Case number (if known)___

			Your expe	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	300.00
	6b. Water, sewer, garbage collection	6b.	\$	60.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	
7.	Food and housekeeping supplies	7.	\$	200.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	\$	100.00
11,	Medical and dental expenses	11.	\$	100.00
12.	Transportation. Include gas, maintenance, bus or train fare.			150.00
	Do not include car payments.	12.	\$	150.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	250.00
	15d. Other insurance. Specify:	15d.	\$	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from	,, .	· · · · · · · · · · · · · · · · · · ·	
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Entered 08/09/17 15:25:54 Desc Main Case 17-23816 Doc 1 Filed 08/09/17 Document Page 40 of 61 **DAVID** WAUGH Debtor 1 Case number (if known) 21. Other. Specify: 0.00 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 3,014.00 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 3,014.00 23. Calculate your monthly net income. 3,509.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 23b. 3,014.00 23c. Subtract your monthly expenses from your monthly income. 495.00 The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? Mo. Yes. Explain here:

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 41 of 61

			Document 1	age 41 or 01		
FIII in th	nis information to iden	tify your case:				
Debtor 1	DAVID First Name	A Middle Name	WAUGH Last Name			
Debtor 2	filing) First Name	Middle Name		····		
	ates Bankruptcy Court for t		Last Name			
Case num		inc. Troublest District o	I IIII IOIS			
(If known)		····	·····			Check if this is ar
			TOTAL WORLD			amended filing
	al Form 107					
State	ment of Fin	ancial Affai	irs for Indivi	duals Filing	for Bankruptc	y 12/1
3e as con	nplete and accurate as	s possible. If two mar	ried people are filing	together, both are equ	ally responsible for supply	ing correct
mormatic	on. If more space is n f known). Answer eve	eeded, attach a sepai	rate sheet to this form	. On the top of any add	ditional pages, write your r	name and case
	. K. 10 1711). Filis 1701 C 40:	ry question.				
Part 1:	Give Details Abo	ut Your Marital Sta	atus and Where Yo	ı Lived Before		
New York Control of the Party o						
	is your current marita	ll status?				
	arried					
LI No	ot married					
		you lived in the last 3	years. Do not include w Dates Debtor 1 I lived there	vhere you live now.		Dates Debtor 2 lived there
			1	Same as Debtor 1		☐ Same as Debtor 1
	23000 WESTWIN	D DRIVE		- Came as Debior 1		Same as Debtor 1
_	Number Street		From 05/03/2003 To 08/04/2017	Number Street		From
			10 00/04/2017			То
	RICHTON PARK	IL 60471			***************************************	
	City	State ZIP Code		City	State ZIP Code	
			Ţ	Same as Debtor 1		Same as Debtor 1
			From			
~~	Number Street		To	Number Street		From
						To
_						
ī	City	State ZIP Code	_	City	State ZIP Code	
3. Within	the last 8 years, did y	Ou ever live with a s	nouse or legal aquival	ont in a community	operty state or territory? (0	
States	and territories include r	Arizona, California, Ida	ho, Louisiana, Nevada,	New Mexico, Puerto Ric	co, Texas, Washington, and	Community property Wisconsin.)
☐ No		10.6.11.11.				
SEE Yes	s. Make sure you fill ou	t Schedule H: Your Co	debtors (Official Form 1	06H).		
Part 2:	Explain the Source	s of Your Income				

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 42 of 61

Debtor 1	DAVID A		WAUGH	Case nu	ımber (if known)	
	rust Name i Middle Name	Last N	ame			
Fill If y	d you have any income from empty in the total amount of income you you are filing a joint case and you have No Yes. Fill in the details.	received	from all jobs and all busi	nesses, including part-ti	me activities.	ndar years?
			Debtor 1		Debtor 2	
		726	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year the date you filed for bankrupto		□ Wages, commissions, bonuses, tips□ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year: (January 1 to December 31, 201)	â)	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar year before th (January 1 to December 31, 2019		☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
Incl une	you receive any other income dude income regardless of whether imployment, and other public bene abling and lottery winnings. If you a	that incoi fit payme	me is taxable. Examples nts; pensions; rental inco	of other income are alin me; interest; dividends;	money collected from laws:	uits: rovalties: and
List	each source and the gross income	from ea	ch source separately. Do	not include income that	you listed in line 4.	
	No Yes. Fill in the details.					
		\$6	Debtor 1 Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year the date you filed for bankrupto	y: <u>S</u>	THOLON	7,757.00 7,125.00 3,922.00		\$ \$ \$
	For last calendar year: (January 1 to December 31, 2016)	<u> </u>	SSA DISA SURS DISA SPENSION S	18,436.00 14,040.00 7,836.00		\$ \$

For the calendar year before that:

(January 1 to December 31, 2015)

19,800.00

13,630.00

7,836.00

SSA DISA

SURS DISA

PENSION

Case 17-23816

Doc 1

Filed 08/09/17 Document

Entered 08/09/17 15:25:54

Debtor 1

		_
VID	Α	

Desc Main Page 43 of 61

DΑ WAUGH Case number (if known)_ First Name Middle Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are eith	her Debtor 1's or Debtor 2's debts p	rimarily consumer del	ots?		
	🗹 No.	Neither Debtor 1 nor Debtor 2 has incurred by an individual primarily f	s primarily consumer door a personal, family, or	lebts. Consumer debts a household purpose."	re defined in 11 U.S.C. § 10	1(8) as
		During the 90 days before you filed	for bankruptcy, did you j	pay any creditor a total o	f \$6,225* or more?	
		☑ No. Go to line 7.				
		Yes. List below each creditor to total amount you paid that a child support and alimony.	creditor. Do not include i	payments for domestic si	unnort obligations, such as	
		* Subject to adjustment on 4/01/16 a				
	☐ Yes	. Debtor 1 or Debtor 2 or both have			v. a anta a tagadinoni.	
		During the 90 days before you filed t			\$600 or man 2	
			or burnauptcy, did you p	ay any creditor a total of	\$600 or more?	
		No. Go to line 7.				
		Yes. List below each creditor to a creditor. Do not include pay alimony. Also, do not include	ments for domestic sub-	port obligations, such as	child support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
				\$	\$	
		Creditor's Name		-	Ψ	Mortgage
		N				☐ Car
		Number Street				Credit card
						Loan repayment
						Suppliers or vendors
		City State	ZIP Code			Other
		Creditor's Name		\$	\$	■ Mortgage
						Car
		Number Street				Credit card
						Loan repayment
		***************************************				Suppliers or vendors
		City State 2	ZIP Code			Other
		Creditor's Name		\$	<u> </u>	☐ Mortgage
						☐ Car
		Number Street				Credit card
						Loan repayment
						Suppliers or vendors
		City State Z	IP Code			Other

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 44 of 61 Document DAVID WAUGH Debtor 1 Case number (if kno First Name 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. MO No Yes. List all payments to an insider. Dates of Total amount Amount you still Reason for this payment payment paid owe Insider's Name Number Street ZIP Code Insider's Name Number Street ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Include payments on debts guaranteed or cosigned by an insider. M No Yes. List all payments that benefited an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid Include creditor's name Insider's Name Number Street City State ZIP Code Insider's Name Number Street

City

ZIP Code

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main

Document

Page 45 of 61

De	>ht	'nΓ	1

	DAME				
ebtor 1	DAVID	A	WAUGH	Case number (if known)	
	First Name	Middle Name (act t)	logge	Case Hussides (if known)	

Within 1 year before you filed for ba List all such matters, including person and contract disputes.	inkruptcy, were you a party in any l al injury cases, small claims actions, d	awsuit, court action, divorces, collection suit	or administratis, paternity ac	tive proceed tions, suppo	ding? ort or custody modifica
√ No					
Yes. Fill in the details.					
	Nature of the case	Court or agenc	у		Status of the cas
Case title		Court Name	·		— Pending
					On appeal
		Number Street	·····		Concluded
Case number					
		City	State ZIF	Code	
Case title					— Pending
	**************************************	Court Name			On appeal
		Number Street		***************************************	Concluded
Case number					
	***************************************	City	State ZIF	Code	***************************************
No. Go to line 11.	is below.				, solved, or levice:
No. Go to line 11.	Describe the proper	t y		ate	·
No. Go to line 11.	Describe the proper	t y			
No. Go to line 11. Yes. Fill in the information below.	Describe the proper	ty	D		
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Describe the proper	ty	D		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Describe the proper	ty ned repossessed.	D		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Describe the proper	ned repossessed. foreclosed.	D		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Explain what happen Property was f Property was f	ned repossessed. foreclosed.	D		Value of the propert
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happen Property was f Property was f	ned repossessed. foreclosed. garnished. attached, seized, or lev	ied.		Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happer Property was r Property was f Property was g ZIP Code Property was a	ned repossessed. foreclosed. garnished. attached, seized, or lev	ied.	ate	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happer Property was r Property was f Property was g ZIP Code Property was a	ned repossessed. foreclosed. garnished. attached, seized, or lev	ied.	ate	Value of the propert
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State	Explain what happer Property was r Property was g Property was g Property was a Describe the propert	ned repossessed foreclosed. garnished, sittached, seized, or lev	ied.	ate	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State	Explain what happer Property was f Property was g Property was a Property was a Explain what happer	ned repossessed. foreclosed. garnished. attached, seized, or lev	ied.	ate	Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State	Explain what happer Property was r Property was g Property was a Property was a Describe the propert Explain what happer	ned repossessed. repossessed. repossessed. repossessed. repossessed. repossessed.	ied.	ate	Value of the propert
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State Creditor's Name	Explain what happer Property was f Property was g Property was a Property was a Explain what happer	ned repossessed. roreclosed. garnished. attached, seized, or lev by	ied.	ate	Value of the property

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 46 of 61 WAUGH Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? MO No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street State ZIP Code Last 4 digits of account number: XXXX-__ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☑ No Yes **List Certain Gifts and Contributions**

Part 5:

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	Value
F-1 (-1-1-1-1)		the gifts	
Person to Whom You Gave the Gift		-	\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
		here to the second	\$
Number Street			
City State ZIP Code	, v		

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 47 of 61

	DAVID First Name	Middle Name		1	WAUGH	Case number (if known)_		
	I not reme	wilde Name		Last Name				
iasa.	in Overen befo	· · · · · · · · · · · · · · · · · ·	16. 1					
Z ·		re you mea	i for ban	Kruptcy, aid	you give any gifts or o	contributions with a total val	ue of more than \$	600 to any charity?
	ves. Fill in the de	etails for eac	ch gift or	contribution.				
	Gifts or contribu	tions to shor	rition	Dagasi	ibe what you contributed			
	that total more th		inco	Descri	ise what you contributed		Date you contributed	Value
c	Charity's Name							\$
_		····	····					\$
N	lumber Street	W-2-1-14.4.						
-	ity 04-4-	705.0						
Ç	ity State	ZIP Code					<u> </u>	
Vithi	in 1 year before	you filed f		ruptcy or sin	nce you filed for bankr	uptcy, did you lose anything	because of theft,	, fire, other
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Email or website address

Person Who Made the Payment, if Not You

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main

Page 48 of 61 Document DAVID **WAUGH** Debtor 1 Case number (if known) Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. M No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. M No Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street State ZIP Code Person's relationship to you _ Person Who Received Transfer Number Street

City

Person's relationship to you _

ZIP Code

Entered 08/09/17 15:25:54 Desc Main Page 49 of 61

Case number (if known)

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Ž No				
Yes. Fill in the details.				
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	Description and value of the prop	erty transferred		Date transfer was made
Name of trust	·····			
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81 List Certain Financial Acc	ounts, Instruments, Safe Deposit	Boxes, and Storag	je Units	
lithin 1 year before you filed for bar	nkruptcy, were any financial accounts	or instruments held in	your name, or for your	benefit,
losed, sold, moved, or transferred?	1			
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Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 50 of 61

WAUGH

First Name	Middle Name				Case		~		
		Last	Nаme						
Have you stored pr ☑ No	operty in a s	storage unit	or place other than	your home wi	ithin 1 year i	before you filed	for bankru	iptcy?	
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wat res. Fill in the t	ietaiis.		Maria atau h			_			
			Who else has or ha	id access to it?		Describe the cor	itents	•	Do you s have it?
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rame of Storage	activity		Name						☐ Yes
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U.,	Jule	ZIF Code							
in 930 Identify	Bronarty	You Hold a	or Control for Son	El					
. Do you hold or cor	strol any pro	operty that so	omeone else owns?	Include any I	property you	u borrowed from	n, are stori	ng for,	
or hold in trust for No	someone.								
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tes. Fill in the	aetalis.								
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Muniper 2866f		***************************************		······································					
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Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Page 52 of 61

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☑ No

☐ Yes. Name of person_

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

DURABLE POWER OF ATTORNEY

I, David A. Waugh, residing at 23000 Westwind Drive, Richton Park, Illinois 60471, hereby appoint Traci M. Waugh of 23000 Westwind Drive, Richton Park, Illinois 60471, as my attorney-in-fact ("Agent") to exercise the powers and discretions described below.

This Power of Attorney shall not be affected by my subsequent incapacity.

My Agent shall have full power and authority to act on my behalf. This power and authority shall authorize my Agent to manage and conduct all of my affairs and to exercise all of my legal rights and powers, including all rights and powers that I may acquire in the future. My Agent's powers shall include, but not be limited to, the power to:

- 1. Open, maintain or close bank accounts (including, but not limited to, checking accounts, savings accounts, and certificates of deposit), brokerage accounts, retirement plan accounts, and other similar accounts with financial institutions.
 - a. Conduct any business with any banking or financial institution with respect to any of my accounts, including, but not limited to, making deposits and withdrawals, negotiating or endorsing any checks or other instruments with respect to any such accounts, obtaining bank statements, passbooks, drafts, money orders, warrants, and certificates or vouchers payable to me by any person, firm, corporation or political entity.
 - b. Add, delete or change beneficiaries to any financial accounts I own including insurance policies, annuities, retirement accounts, payable on death savings or checking accounts or other investments.
 - c. Perform any act necessary to deposit, negotiate, sell or transfer any note, security, or draft of the United States of America, including U.S. Treasury Securities.
 - d. Have access to any safe deposit box that I might own, including its contents.
- 2. Provide for the support and protection of myself or of any minor child I have a duty to support or have established a pattern of prior support, including, without limitation, provision for food, lodging, housing, medical services, recreation and travel.
- 3. Sell, exchange, buy, invest, or reinvest any assets or property owned by me. Such assets or property may include income producing or non-income producing assets and property.
- 4. Purchase and/or maintain insurance and annuity contracts, including life insurance upon my life or the life of any other appropriate person.

- 5. Take any and all legal steps necessary to collect any amount or debt owed to me, or to settle any claim, whether made against me or asserted on my behalf against any other person or entity.
- 6. Enter into binding contracts on my behalf.
- 7. Exercise all stock rights on my behalf as my proxy, including all rights with respect to stocks, bonds, debentures, commodities, options or other investments.
- 8. Maintain and/or operate any business that I may own.
- 9. Employ professional and business assistance as may be appropriate, including attorneys, accountants, and real estate agents.
- 10. Sell, convey, lease, mortgage, manage, insure, improve, repair, or perform any other act with respect to any of my property (now owned or later acquired) including, but not limited to, real estate and real estate rights (including the right to remove tenants and to recover possession). This includes the right to sell or encumber any homestead that I now own or may own in the future.
- 11. Prepare, sign, and file documents with any governmental body or agency, including, but not limited to, authorization to:
 - a. Prepare, sign and file income and other tax returns with federal, state, local, and other governmental bodies.
 - b. Obtain information or documents from any government or its agencies, and represent me in all tax matters, including the authority to negotiate, compromise, or settle any matter with such government or agency.
 - c. Prepare, sign and file any bankruptcy petition, schedules, and other related documents; discuss any and all matters with Trustee and represent me at the 341 Meeting of Creditors; to sign affidavits and other documents necessary for the filing of motions, reaffirmations, bankruptcy dismissals or conversions and other related items.
 - d. Prepare applications, provide information, and perform any other act reasonably requested by any government or its agencies in connection with governmental benefits (including medical, military and social security benefits), and to appoint anyone, including my Agent, to act as my "Representative Payee" for the purpose of receiving Social Security benefits.
- 12. Make gifts from my assets to members of my family and to such other persons or charitable organizations with whom I have an established pattern of giving (or if it is

appropriate to make such gifts for estate planning and/or tax purposes), to file state and federal gift tax returns, and to file a tax election to split gifts with my spouse, if any. No Agent acting under this instrument, except as specifically authorized in this instrument, shall have the power or authority to (a) gift, appoint, assign or designate any of my assets, interests or rights, directly or indirectly, to such Agent, such Agent's estate, such Agent's creditors, or the creditors of such Agent's estate, (b) exercise any powers of appointment I may hold in favor of such Agent, such Agent's estate, such Agent's creditors, or the creditors of such Agent's estate, or (c) use any of my assets to discharge any of such Agent's legal obligations, including any obligations of support which such Agent may owe to others, excluding those whom I am legally obligated to support.

- 13. To transfer any of my assets to the trustee of any revocable trust created by me, if such trust is in existence at the time of such transfer.
- 14. To utilize my assets to fund a trust not created by me, but to which I have either established a pattern of funding, or to fund a trust created by my Agent for my benefit or the benefit of my dependents, heirs or devisees upon the advice of a financial adviser.
- 15. To create, sign, modify or revoke any trust agreements or other trust documents in an attempt to manage or create a trust that was created for my benefit or the benefit of my dependents, heirs or devisees. This shall include the creation, modification or revocation of any inter vivos, family living, irrevocable or revocable trusts.
- 16. Subject to other provisions of this document, my Agent may disclaim any interest, which might otherwise be transferred or distributed to me from any other person, estate, trust, or other entity, as may be appropriate. However, my Agent may not disclaim assets to which I would be entitled, if the result is that the disclaimed assets pass directly or indirectly to my Agent or my Agent's estate. Provided that they are not the same person, my Agent may disclaim assets which pass to my Gift Agent, and my Gift Agent may disclaim assets which pass to my Agent.
- 17. Have access to my healthcare and medical records and statements regarding billing, insurance and payments.

This Power of Attorney shall be construed broadly as a General Power of Attorney. The listing of specific powers is not intended to limit or restrict the general powers granted in this Power of Attorney in any manner.

Any power or authority granted to my Agent under this document shall be limited to the extent necessary to prevent this Power of Attorney from causing, (i) my income to be taxable to my Agent, (ii) my assets to be subject to a general power of appointment by my Agent, or (iii) my Agent to have any incidents of ownership with respect to any life insurance policies that I may own on the life of my Agent.

My Agent shall not be liable for any loss that results from a judgment error that was made in good faith. However, my Agent shall be liable for willful misconduct or the failure to act in good faith while acting under the authority of this Power of Attorney. An Agent is not liable for the actions of another Agent, including a Co-Agent or Predecessor Agent, unless the Agent participates in or conceals a breach of fiduciary duty committed by the other Agent. An Agent who has knowledge of a breach or imminent breach of fiduciary duty by another Agent must notify me and, if I am incapacitated, take whatever actions may be reasonably appropriate in the circumstances to safeguard my best interest.

No person who relies in good faith on the authority of my Agent under this instrument shall incur any liability to me, my estate or my personal representative. I authorize my Agent to indemnify and hold harmless any third party who accepts and acts under this document.

If any part of any provision of this instrument shall be invalid or unenforceable under applicable law, such part shall be ineffective to the extent of such invalidity only, without in any way affecting the remaining parts of such provision or the remaining provisions of this instrument.

My Agent shall not be entitled to any compensation, during my lifetime or upon my death, for any services provided as my Agent. My Agent shall be entitled to reimbursement of all reasonable expenses incurred as a result of carrying out any provision of this Power of Attorney.

My Agent shall have the right by written instrument to delegate any or all of the foregoing powers involving discretionary decision-making to any person or persons whom my Agent may select, but such delegation may be amended or revoked by any Agent (including any Successor) named by me who is acting under this Power of Attorney at the time of reference.

My Agent shall provide an accounting for all funds handled and all acts performed as my Agent as required under state law or upon my request or the request of any authorized personal representative, fiduciary or court of record acting on my behalf.

This Power of Attorney shall become effective immediately, and shall not be affected by my disability or lack of mental competence, except as may be provided otherwise by an applicable state statute. This is a Durable Power of Attorney. This Power of Attorney shall continue effective until my death. This Power of Attorney may be revoked by me at any time by providing written notice to my Agent.

[SIGNATURE PAGE FOLLOWS]

Case 17-23816 Doc 1 Filed 08/09/17 Entered 08/09/17 15:25:54 Desc Main Document Page 57 of 61

Dated 1 10 , 2015, a	t Richton Park, Illinois.
David A. Waugh	
Witness Signature: Wasania	(kms
Name: NATASHIA HAGUS	
City: STEGER	
State: IUINOIS	
STATE OF ILLINOIS, COUNTY OF COOK, ss:	
This instrument was acknowledged before reconstruction by David A. Waugh.	me on this 10 day of JULY,
OFFICIAL SEAL SORETTA PATTON NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 05-28-2017	Notary Public Otth
CAPINES: 05-28-2017	My commission expires5728/17_

WITNESS ATTESTATION

The undersigned witness certifies that David A. Waugh, known to me to be the same person whose name is subscribed as Principal to the foregoing Power of Attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as the free and voluntary act of the Principal, for the uses and purposes therein set forth. I believe him or her to be of sound mind and memory. The undersigned witness also certifies that the witness is not: (a) the attending physician or mental health service provider or a relative of the physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care facility in which the Principal is a patient or resident; (c) a parent, sibling, descendant, or any spouse of such parent, sibling, or descendant of either the Principal or any Agent or Successor Agent under the foregoing Power of Attorney, whether such relationship is by blood, marriage, or adoption; or (d) an Agent or Successor Agent under the foregoing Power of Attorney.

Dated:

Nastashia Harris

22901 Shagbark Lane Steger, Illinois 60475

7082270181

OFFICIAL SEAL

SORETTA PATTON NOTARY PUBLIC, STATE OF ILLINOIS

MY COMMISSION EXPIRES: 05-28-2017

Notice to Person Executing Power of Attorney:

A Power of Attorney is an important legal document. By signing the Power of Attorney, you are authorizing another person to act for you, the principal. Before you sign this Power of Attorney, you should know these important facts:

Your Agent (attorney-in-fact) has no duty to act unless you and your Agent agree otherwise in writing.

This document gives your Agent the powers to manage, dispose of, sell and convey your real and personal property, and to use your property as security if your Agent borrows money on your behalf, unless you provide otherwise in this Power of Attorney.

Your Agent will have the right to receive reasonable payment for services provided under this Power of Attorney unless you provide otherwise in this Power of Attorney.

The powers you give your Agent will continue to exist for your entire lifetime, unless you state that the Power of Attorney will last for a shorter period of time or unless you otherwise terminate the Power of Attorney. The powers you give your Agent in this Power of Attorney will continue to exist even if you can no longer make your own decisions respecting the management of your property, unless you provide otherwise in this Power of Attorney.

You can change or correct the terms of this Power of Attorney only by executing a new Power of Attorney, or by executing an amendment through the same formalities as an original. You have the right to revoke or terminate this Power of Attorney at any time, so long as you are competent.

This Power of Attorney must be dated and must be acknowledged before a notary public and at least one witness. If the Power of Attorney is signed by two witnesses, the witnesses must be mentally competent and they must witness the principal's signing of the Power of Attorney or (2) the principal's signing or acknowledgment of his or her signature. A Power of Attorney that may affect real property should be acknowledged before a notary public so that it may easily be recorded.

You should read this Power of Attorney carefully. When effective, this Power of Attorney will give your Agent the right to deal with property that you now have or might acquire in the future. The Power of Attorney is important to you. If you do not understand the Power of Attorney, or any provision of it, then you should obtain the assistance of an attorney or other qualified person.

Notice to Agent:

When you accept the authority granted under this Power of Attorney a special legal relationship, known as agency, is created between you and the Principal. Agency imposes upon you duties until you resign or the Power of Attorney is terminated or revoked. As Agent you must:

- (1) do what you know the Principal reasonably expects you to do with the Principal's property;
- (2) act in good faith for the best interest of the Principal, using due care, competence, and diligence;
- (3) keep a complete and detailed record of all receipts, disbursements, and significant actions conducted for the Principal;
- (4) attempt to preserve the Principal's estate plan, to the extent actually known by the Agent, if preserving the plan is consistent with the Principal's best interest; and
- (5) cooperate with a person who has authority to make health care decisions for the Principal to carry out the Principal's reasonable expectations to the extent actually in the Principal's best interest.

As Agent you must not do the following:

- (1) act so as to create a conflict of interest that is inconsistent with the other principles in this Notice to Agent;
- (2) do any act beyond the authority granted in this Power of Attorney;
- (3) commingle the Principal's funds with your funds;
- (4) borrow funds or other property from the Principal, unless otherwise authorized;
- (5) continue acting on behalf of the Principal if you learn of any event that terminates this Power of Attorney or your authority under this Power of Attorney, such as the death of the

Principal, your legal separation from the Principal, or the dissolution of your marriage to the Principal.

If you have special skills or expertise, you must use those special skills and expertise when acting for the Principal. You must disclose your identity as an Agent whenever you act for the Principal by writing or printing the name of the Principal and signing your own name "as Agent" in the following manner: "(Principal's Name) by (Your Name) as Agent".

The meaning of the powers granted to you is contained in Section 3-4 of the Illinois Power of Attorney Act, which is incorporated by reference into the body of this Power of Attorney.

If you violate your duties as Agent or act outside the authority granted to you, you may be liable for any damages, including attorney's fees and costs, caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice from an attorney.

I have read the foregoing notice and I understand the legal and fiduciary duties that I assume by acting or agreeing to act as the Agent (attorney-in-fact) under the terms of this Power of Attorney.

Date:

Signed:

Traci M. Waugh

This document was prepared by:

Traci Waugh (708) 275-5075

Page 9 of 9

OFFICIAL SEAL

SORETTA PATTON NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 05-28-2017